

~~BEST AVAILABLE COPY~~

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number  
09/844,234  
P-9640.00

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 28           |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 28 minus 20= | 8                        |
| INDEPENDENT CLAIMS               | 4 minus 3 =  | 1                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|---|---|-------|---|------------------|
|   | Total                                     | • 28  | Minus                                       | .. 28            |
| Independent   | • 4                                       | Minus | ... 4                                       | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

|           |        |              |        |
|-----------|--------|--------------|--------|
| RATE      | Fee    | RATE         | Fee    |
| BASIC FEE | 355.00 | OR BASIC FEE | 710.00 |
| X\$ 9=    |        | OR X\$18=    | 144    |
| X40=      |        | OR X80=      | 80     |
| +135=     |        | OR +270=     |        |
| TOTAL     |        | OR TOTAL     | 934    |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X40=             |                        | OR X80=             |                        |
| +135=            |                        | OR +270=            |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT B   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|---|---|-------|---|------------------|
|   | Total                                     | •     | Minus                                       | ..               |
| Independent   | •   | Minus | ...   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X40=             |                        | OR X80=             |                        |
| +135=            |                        | OR +270=            |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

| AMENDMENT C   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|---|---|-------|---|------------------|
|   | Total                                     | •     | Minus                                       | ..               |
| Independent   | •   | Minus | ...   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X40=             |                        | OR X80=             |                        |
| +135=            |                        | OR +270=            |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.